

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Reform America Fund		FEC IDENTIFICATION NUMBER ▼ C C00581934	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Nonbox		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 04 / 2016	
Mailing Address 5307 S 92nd St		Amount 127328.50	
City Hales Corners	State WI	Zip Code 53130-1677	Transaction ID : E1BCFC849E8B74F29A72 Date of Disbursement or Obligation MM / DD / YYYY 10 / 03 / 2016
Purpose of Expenditure Media Buy		Category/Type	
Name of Federal Candidate Clinton, Hillary Rodham, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 2088443.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Nonbox		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 04 / 2016	
Mailing Address 5307 S 92nd St		Amount 255957.83	
City Hales Corners	State WI	Zip Code 53130-1677	Transaction ID : EE68F0B017D32445EA43 Date of Disbursement or Obligation MM / DD / YYYY 10 / 03 / 2016
Purpose of Expenditure Media Buy		Category/Type	
Name of Federal Candidate Clinton, Hillary Rodham, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 2088443.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) **SUBTOTAL** of Itemized Independent Expenditures..... ▶ **383286.33**

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶

(c) **TOTAL** Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Pickens, Lorri, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 04 / 2016

Signature